Amendment		
Yes	$\boxtimes$	No

Disclosure Report Cover

Use this form for general report and committee information, must be signed and submitted along with other detailed forms.

Do not use this form to update information

1. Committee Inform	nation			AND THE STREET	
a. Full Name					c. ID Number
COMMITTEE TO E	LECT THOMASINE MOO	ORE			JHCW2W
	de City, State and Zip Code)				d. Date Filed
410 NEW BRIDGE #12B	STREET		APR 2 7 2018		02/28/2018
JACKSONVILLE N	С				e. Phone Number
28540		Fig. Rev			
and the second s					910/347-2060
2. Report Year	3. Period Start Date (mm/d	id/yy) 4. Period (mm/dd/yy)		5. Treasurer Full N	ame .
2018	02/12/2018	02/	/28/18/	MITTIE J GRAY	**************************************
6. Type of Committe		9. Type of Report	check only	one type of report fr	om one category)
Candidate Campai	gn Party	Municipal	State/Cou	nty	Referendum
PAC Indonesia dent	Referendum	Organizational	I Or	ganizational	Organizational
Independent Expenditure Legal Expense Fur	Joint Fundraiser	Thirty-five day	y Qu	arterly	Pre-referendum
7. Type of Fund	10 (if applicable, check one)	Pre-primary		First	
"Booster Fund"	(пририсания спестопе)	Pre-primary Pre-election		First Second	Final Supplemental Final
Building Fund		Pre-runoff		Second Third	Supplemental Final Annual
		Semi-annual	1=	Fourth	Special Special
		Mid Year	r Ser	ni-annual	openia:
Other:		Year End			10. Special Report Name
the second section of the second section of the second section of the second section of the second section sec		Final		Year End	
8. Number of Fundra	aisers this Report	Special	Fin	nal	
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Amendment  $\boxtimes$ No

**Detailed Summary**Use this form to summarize all disclosure reporting forms and to total monetary information.

	. Type of Report		3. ID Number
COMMITTEE TO ELECT THOMASINE MOORE COUNTY COMMISSIONER	DRGANIZATION	AL	JHCW2W
	0015	Total this	Total this
Start of Election Cycle: January 1,	2017	Reporting Period	Election Cycle
4) Cash on Hand at Start		\$ 0	\$ 0
RECEIPTS			
5) Aggregated Contributions from Individuals	(CRO-1205)	\$ 20.00	\$ 20.00
6) Contributions from Individuals	(CRO-1210)	\$ 1,000.00	\$ 1,000.00
7) Contributions from Political Party Committees	(CRO-1220)	\$ 0	\$ 0
8) Contributions from Other Political Committees	(CRO-1230)	\$ 0	\$ 0
9) Loan Proceeds	(CRO-1410)	\$ 0	\$ 0
10) Refunds/Reimbursements To the Committee	(CRO-1240)	\$ 0	\$ 0
11) Other Receipt Sources			
11a) Interest on Bank Accounts	(CRO-1250)	\$ 0	\$ 0
11b) Contributions from Not-for-Profit Organization	is (CRO-1250)	\$ 0	\$ 0
11c) Outside Sources of Income	(CRO-1250)	\$ 0	\$ 0
11d) Legal Expense Fund – Other Sources	(CRO-1270)	\$ 0	\$ 0
11 e) Exempt Purchase Price Sales	(CRO-1265)	\$ 0	\$ 0
12) TOTAL RECEIPTS (Add lines 5, 6, 7, 8, 9, 10, 11a, 11b, 11c,	11d and 11e)	\$ 1020.00	\$ 1020.00
<u>EXPENDITURES</u>			
13) Disbursements			
13a) Operating Expenditures	(CRO-1310)	\$ 383.00	\$ 383.00
13b) Contributions to Candidates/Political Committee	es (CRO-1310)	\$ 50.00	\$ 50.00
13c) Coordinated Party Expenditures	(CRO-1310)	\$ 0	\$ 0
14) Aggregated Non-Media Expenditures	(CRO-1315)	\$ 0	\$ 0
15) Loan Repayments	(CRO-1420)	\$ 0	\$ 0
16) Refunds/Reimbursements From the Committee	(CRO-1320)	\$ 0	\$ 0
17) In-Kind Contributions	(CRO-1510)	\$ 0	\$ 0
18) TOTAL EXPENDITURES (Add lines 13a, 13b, 13c, 14, 15,	16 and 17)	\$ 443.00	\$ 443.00
19) Cash on Hand at End (Add lines 4 and 12 together, then subtro	act line 18)	\$ 577.00	\$ 577.00
ADDITIONAL INFORMATION		Marin Marin	
20) Non-Monetary Gifts Given to Other Committees	(CRO-1330)	\$ 0	
21) Outstanding Loans (incl. ones from other campaigns	) (CRO-1430)	\$ 0	
22) Debts and Obligations owed By the Committee	(CRO-1610)	\$ 0	
23) Debts and Obligations owed To the Committee	(CRO-1620)	\$ 0	
24) Account Transfers Within the Committee	(CRO-1720)	\$ 0	
25) Administrative Support	(CRO-1710)	\$ 0	\$ 0
26) Forgiven Loans	(CRO-1440)	\$ 0	\$ 0
27) 48-Hour Notice Reports Sum	(CRO-2220)	\$ 0	\$ 0
28) Contributions to be Refunded	(CRO-1215)	\$ 0	\$ 0

## **Aggregated Contributions from Individuals**

Page

<u>1</u> of <u>1</u>

mendment		
Yes	$\boxtimes$	No

Optional form used to report NC Contributions From Individuals of \$50 or less

1.	1. Committee Full Name (and Fund if applicable)							ımber
COMMITTEE TO ELECT THOMASINE MOORE COUNTY COMMISSIONER								JHCW2W
	Conti							
2000000	Amend		b. Account	c. Form of Payment	d. In-Kind	e. Date		. Amount
Σ		Add	Code		Description	(mm/dd/yyyy	) '	. Amount
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Contributions from Individuals		Pg	1	of	1_		Yes 🔀	No

		m Individuals		Pş			☐ Ye	s 🛚 No
		ividual contributions of (and Fund if applica		or contributions un	der \$50 if form C	RO 1205 is n 2. <b>ID N</b> ui		
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	city, state, & zip)	a i none		ATTORNEY		u. Commen	us .	
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	V BRIDGE ST			c. Employer's Name/S	Specific Field			
#3A			DAVID L BEST					
28540	NVILLE NC			ATTORNEY AT	LAW	e. Election	Sum to Date	
20340						\$	500.00	
f. Prior	g. Account Code	h. Form of Payment	i. In-k	ind Description	j. Date (mm/dd/	ууу)	k. Amoun	t
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	city, state, & zip) WRIGHT			ATTORNEY				
	V BRIDGE ST			c. Employer's Name/S	Specific Field	_		
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28540						\$	500.00	
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(This line must be on line 6 of Detailed Summary Page CRO-1100)

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Di	shr	ırsem	ents
19 JF 11	- DU DU		

Pg

Amendment

No

 $\boxtimes$ 

of <u>2</u> Use this form to report expenditures from the committee for; operating expenses, contributions to candidate/political committees and coordinated party expenditures.

	ull Name (and Fund				2. ID Number		
	O ELECT THOMA	SINE MOORE			JHCW2W		
3. Type of Disbu	irsement <u>(Plea</u>	se use separate C.	RO-1310 forms for each ty	<u>pe of Disburseme</u>	ant.)		
Operating Ex	cpenses	Contributions to Can	ndidates/Political Committees	Coo:	rdinated Party Expenditures		
4. Payee Inform	ation		Add	Remove			
	ng Address & Phone		b. Coordinated Committee Na		d. Comments		
(include city, state,	-						
	TA MINISTRIES						
578 SANDRIDO			c. Level Registered (Specify)				
SUITE 5			Federal	County:			
HUBERT NC 2	9520		State	Municipality:	e. Election Sum to Date		
HUBERT NC 2	0339		LJ State LJ	Municipanty:	e. Election Sum to Date		
					\$ 50.00		
		h D	<u> </u>				
f. Account Code	g. Form of Payment	h. Purpose Code	i. Date (mm/dd/yyyy)	j. Amount	k. Required Remarks		
TM	CHECK	0	03/19/2018	\$50.00	DONATION TO		
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				\$			
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4. Payee Inform	ation		Add 🗌	Remove			
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(include city, state,	-						
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JACKSONVILI	JE NC 28540		c. Level Registered (Specify)				
DITOTIO	32 110 203 10		Federal	County:			
			State	Municipality:	e. Election Sum to Date		
				Municipanty.	e. Election Sum to Date		
					\$ 25.00		
f. Account Code	g. Form of Payment	h. Purpose Code	i. Date (mm/dd/yyyy)	j. Amount	k. Required Remarks		
CON A	OTTOX		02/01/0010	#0 # 00	DONATION TO		
TM	CHECK	0	03/21/2018	\$25.00	ORGANIZATION		
			1	\$			
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(include city, state, ARABAIN TEM			-				
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JACKSONVILI	JE.		c. Level Registered (Specify)				
			Federal	County:			
			State	Municipality:	e. Election Sum to Date		
					\$ 120.00		
f. Account Code	g. Form of Payment	h. Purpose Code	i. Date (mm/dd/yyyy)	j. Amount	k. Required Remarks		
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E 70-4-1 1 1 2 1					£ 105.00		
5. Total only thi					\$ 195.00		
and the second s	CRO-1310 Pages	B (7.0					
		-	00 if Operating Expenses)		\$ 443.00		
	•		00 if Contrib to Candidates/Politic	•	}		
(This line goes in line 13c of Detailed Summary Page CRO-1100 if Coordinated Party Expenditures)							
	es (List detailed ex	A continued from the continued of the co	1/3 The second s				
A* - Media	B* - Printing	C* - Fund		D - To Anothe			
E - Salaries	F* - Equipment		-		Public Office Expenses		
I - Postage	J - Penalties	K* - Offic	ce Expenses	Q* - Donation	n to Legal Expense Fund		
O* - Other							
* Codes requir	* Codes require detailed explanation in required remarks field (k)						

	report expenditures		Pg se for; operating expenses	2 of s, contributions to	
	coordinated party ex ull Name (and Fun	<del></del>			2. ID Number
	TO ELECT THOM				JHCW2W
3. Type of Disb			RO-1310 forms for each	tung of Dichurca	
Operating I			didates/Political Committees		Coordinated Party Expenditures
4. Payee Inform			Add	Remove	
	ing Address & Phone	10000	b. Coordinated Committee	and an extended the second of	d. Comments
(include city, state,	-				
ST PAUL MB	CHURCH				
RICHLANDS 1	NC		c. Level Registered (Specify	)	
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			State	Municipality:	e. Election Sum to Date
					\$ 50.00
f. Account Code	g. Form of Payment	h. Purpose Code	i. Date (mm/dd/yyyy)	j. Amount	k. Required Remarks
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				\$	
4. Payee Inform			Add [	Remove	
	ing Address & Phone		b. Coordinated Committee	Name	d. Comments
(include city, state,		1.			
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521 YOPP RD STE 214-155			c. Level Registered (Specify Federal	<u> </u>	
JACKSONVIL	IFNC		State	County: Municipality:	e. Election Sum to Date
28540	EL IVO		State	wimicipality.	\$ 148.00
f. Account Code	g. Form of Payment	h. Purpose Code	i. Date (mm/dd/vyyy)	j. Amount	k. Required Remarks
TM	CHECK	A	04/11/2018	\$148.00	WEB PAGE
				\$	
4. Payee Inform	nation		Add [	Remove	
a. Full Name, Mail	ing Address & Phone		b. Coordinated Committee	Name .	d. Comments
(include city, state,					
JOE WEBB FO					•
JACKSONVIL	LE NC	į	c. Level Registered (Specify		
2854			Federal	County:	
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TM	CHECK	D	04/08/2018	\$50.00	CANDIDATE
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